* * * * * * * * * * * * * * * * * * *			•	ļ	Amendment			
Disclosure Re	port Cover				Yes No			
Jse this form for gen	neral report and committee in	nformation, must be s	igned and subn	nitted along with o	ther detailed forms.			
	to update information							
1. Committee Infor	mation			. ,	c. ID Number			
a. Full Name Committee to Elect	Dogor Figh Mayor	<u> </u>	-OEI\/	<u>E</u> D	RF122214			
Committee to Elect	Roger I ish Mayor	H	ECEIVI					
b. Mailing Address (inc	ude City, State and Zip Code)		OCT 2 8 20	15	d. Date Filed			
3905 Waters Reach					10/26/2015			
Indian Trail, NC 28	3079	Unio	n Co. Board of E	lections	e. Phone Number			
					704 821 6577			
2. Report Year	3. Period Start Date (mm/d	4. Period E	End Date	5. Treasurer Ful	ll Name			
z. Report Tear	3.1 0110d 5dd1 t 5dd6 (mass	(mandaryy)	·	Nancy Lynn Jaco	obsen			
2015	01/01/2015	10/19	9/2015					
6. Type of Commit	tee (Check One)	9. Type of Report	(check on	ly one type of repor	rt from one category)			
Candidate Camp		Municipal	State/C		Referendum			
PAC	Referendum	Organizational		Organizational	Organizational			
Independent Expenditure	Joint Fundraiser	Thirty-five day		Quarterly	Pre-referendum			
Legal Expense I				Pinst.	Final			
7. Type of Fund	(if applicable, check one)	Pre-primary Pre-election		First Second	Supplemental Final			
"Booster Fund" Building Fund		Pre-runoff	IH	Third	Annual			
Danuing I und		Semi-annual		Fourth	Special			
·	-	Mid Year	l	Semi-annual	10 Seeds Donort Name			
Other:		Year End		Mid Year Year End	10. Special Report Name			
9 Number of Fund	Iraisers this Report	Special		Final				
o. Number of Fund	A A A A A A A A A A A A A A A A A A A	1 ·		Special .				
11. Account Infori	nation		11. Account	Information				
a. Financial Institution			a. Financial Ins	titution Full Name				
BB+T			PayPal	 				
b. Purpose	c. Account Code		b. Purpose Online paym	opt .	c. Account Code			
Checking	<i>,</i>	١.	and receipt	env	В			
	d. Period Begin Balanc	e	una roccipi		d. Period Begin Balance			
					\$ 0.00			
	\$ 350.00							
CERTIFICATION I certify that the Co	annittee or Fund is in cound	iance with all applica	able provisions	of Article 22A, 22	B, & 22D-22M of Chapter 163 of			
the NC General Sta	tutes and that no funds are c id correct and that I have bee	ommingied with prof in trained by the NC S	State Board of !	Elections.	ds. I further certify that this report			
Nancy Jac	obsen	La	my Jaco	bun	10/26/2015			
	Printed Name of Signer	. s	ignature of Appoir	nted Treasurer	Date			
FOR OFFICE USE	ONLY		. 120	״	Delivery Method			
Date Received	: 1 <u>9/28/15</u>	Employee:	Klam	m	Normal Mail			
Date Postmark	ed: 10/26/15	Employee:	Ka	umh	Registered Mail Hand Delivered			
Date Scanned:	10/28/15	Employee:	KY	aumo!	Electronically Filed Signer has not received			
Date Data Ent	ered:	Employee:			mandatory training			
Please Note: T	custod	ian of books informa	tion, or accoun	t information.	dress, treasurer, assistant treasurer,			
1	You must amend the Stat	ement of Organizatio	n (CRO-2100A	A-E) to make comm	ittee changes.			

Detailed Summary

No No Use this form to summarize all disclosure reporting forms and to total monetary information. 3. ID Number 2. Type of Report 1. Committee Full Name (and Fund if applicable) RF122214 Committee to Elect Roger Fish Mayor Pre-Election Total this Total this 2015 January 1, Start of Election Cycle: Reporting Period **Election Cycle** 3,492.51 ŝ Cash on Hand at Start RECEIPTS 1,100.00 100.00 5) Aggregated Contributions from Individuals (CRO-1205) 6,936.02 (CRO-1210) \$ 100.00 \$ 6) Contributions from Individuals \$ 7) Contributions from Political Party Committees (CRO-1220) \$ **Contributions from Other Political Committees** (CRO-1230) \$ 2,000.00 (CRO-1410) Loan Proceeds 150.00 150.00 (CRO-1240) 10) Refunds/Reimbursements To the Committee 11) Other Receipt Sources \$ 11a) Interest on Bank Accounts (CRO-1250) \$ 11b) Contributions from Not-for-Profit Organizations (CRO-1250) \$ 11c) Outside Sources of Income (CRO-1250) \$ (CRO-1270) 11d) Legal Expense Fund - Other Sources \$ (CRO-1265) 11 e) Exempt Purchase Price Sales 350.00 10,186.02 TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) EXPENDITURES 13) Disbursements 1,263.50 7,480.99 (CRO-1310) 13a) Operating Expenditures \$ \$ 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ \$ 13c) Coordinated Party Expenditures (CRO-1310) \$ (CRO-1315) \$ 14) Aggregated Non-Media Expenditures \$ (CRO-1420) 15) Loan Repayments \$ (CRO-1320) Refunds/Reimbursements From the Committee 16) \$ 126,02 (CRO-1510) 17) In-Kind Contributions TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 1,263.50 \$ 7,607.01 18) 2,579.01 2,579.01 Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) ADDITIONAL INFORMATION Non-Monetary Gifts Given to Other Committees (CRO-1330) 20) (CRO-1430) \$ 2000.00 Outstanding Loans (incl. ones from other campaigns) 21) (CRO-1610) \$ 103.47 Debts and Obligations owed By the Committee 22) (CRO-1620) Debts and Obligations owed To the Committee 23) Account Transfers Within the PECEIVED (CRO-1720) 24) \$ \$ 25) Administrative Support (CRO-1710) OCT 2 8 2015 \$ \$ 26) Forgiven Loans (CRO-1440) \$ (CRO-2200) \$ 27) 48-Hour Notice Reports Sum Union Co. Board of Elections \$ (CRO-1215) Contributions to be Refunded

Aggregated Contributions from Individuals

Page

<u>1</u> of

Yes

No No

Optional form used to report NC Contributions From Individuals of \$50 or less

Committee Full	2. 1	2. ID Number			
committee to Elect	Roger Fish May	/or			RF122214
Contributor Info	rmation				
Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
Add	A	Check		09/23/2015	\$ 50.00
Remove		O. O			
Add	A	Check		09/23/2015	\$ 50.00
Remove					
Add	· ·				\$
Remove Add			 		
Remove		}			\$
Add				•	\$
7 Remove					
Add					\$
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Add					\$
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Add					\$
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Add			Ì		\$
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Add			1		\$
Remove Add					
Remove			`		\$
Add	 -				6
Remove			-		\$
Add					\$
Remove	***				Ψ
Add					\$
Remove					
Add		•			\$
Remove					
Add		• •			\$
Remove					
Add	-	RECEIVED			\$
Remove					
Add		OCT 2 8 2015			\$
Remove					
Add		Union Co. Board of Elections			\$
Remove	hin Dogo				\$ 100.00
4. Total only t					
5. Total of AL		Pages Summary Page CRO-1100)			\$ 100.00

Contril	butions from	ı Individuals	•		Pg		of <u>1</u>	Amendment Yes	⊠ No
Use this fo	rm to report indiv	idual contributions ov	er \$50	or contrib	outions under	r \$50 if form C	RO 1205 is no	t used	
1. Commi	ttee Full Name (a	and Fund if applicab	le)		. "		2. ID Num	iber	
Committee	e to Elect Roger F	ish Mayor						RF122214	
3. Contrib	outor Informatio	n		Add	Rem	ove	···	•	
	e, Mailing Address &	Phone			tle/Profession		d. Comment	<u> </u>	
	ity, state, & zip)			Teache	r				
Robert Hi				a Employ	yer's Name/Spe	oitic Field		•	
	pton Downs Dr.				ion Services	Cinc Ficia		•	
704 218 3	IC 28112-7440			Dudoui			e. Election S	um to Date	
704 210 3	110	• .				•	\$	200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	and Descri	ption	j. Date (mm/dd	/yyyy)	k. Amount	<u> </u>
	A	Check			<u> </u>	 	7/2015	\$	100.00
			<u> </u>					\$	
			1					\$,
				4.7.1	[] n			•	
	butor Informatio		<u>. </u>	Add		nove	d. Commen	fo .	
	e, Mailing Address &	k Phone		b. Job Ti	itle/Profession		u. Commen	13	
(include	city, state, & zip)			-					
	•		•	c. Emplo	yer's Name/Sp	ecific Field			
							e. Election S	Sum to Date	
							\$		
f, Prior	g. Account Code	h. Form of Payment	i, In-l	Kind Descri	iption	j. Date (mm/de	d/yyyy)	k. Amount	<u>. </u>
1,11101	g. Account Code	in roth of Laymon			· · · · · · · · · · · · · · · · · · ·			\$	-
								\$	
			-					\$	
2 0 - 4 -	butor Informatio	,	\perp	Add	□ Rer	nove		<u> </u>	<u> </u>
	ne, Mailing Address &				itle/Profession		d. Commen	its	
•	city, state, & zip)					•		-	
-		ı		c. Emple	oyer's Name/Sp	secific Field			•
į	•				. .				·
]		·					e. Election	Sum to Date	
							\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Descr	iption	j. Date (mm/d	d/yyyy)	k. Amount	
								\$	· · · · · · · · · · · · · · · · · · ·
				pr	ECEI\	/FD		\$	
								\$	·
4. Tota	l only this Pag	ge			OCT 2 8 2	U15	\$		100.00
	of ALL CRO			Unior	Co. Board of	Elections	\$		100.00
1		Detailed Summary Page (CRO-110			-IA HALIA			10000

n:	ah		~C14	em	an	to
1) 1	sn	111	"SI	am	e n	LS

Amendment Yes

 \boxtimes

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Fu	ll Name (and Fund	if applicable)			2. ID Number		
	ect Roger Fish Mayo				RF122214		
3. Type of Disbu		se use senarate C	RO-1310 forms for each ty	pe of Disburseme	ent.)		
		Contributions to Can	didates/Political Committees	·	rdinated Party Expenditures		
Operating Ex		Contributions to Can		Remove			
4. Payee Informa			Add L		d. Comments		
a. Full Name, Mailin	g Address & Phone		b. Coordinated Committee Na	ine	d. Comments		
(include city, state, &	k zip)						
All Star Signs							
241 Post Office I	Dr., Suite 7A		c. Level Registered (Specify)				
Indian Trail, NC		County:					
704 821 4330	20019		State 🛛	Municipality:	c. Election Sum to Date		
704 021 4550					0 004.50		
•	•				\$ 324.50		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
		B	00/04/2015	\$ 167.07	Signs and Stake		
Α	Debit Card	В	09/24/2015	\$ 107.07			
,				\$	· 1		
4. Payee Inform	ation		Add L	Remove			
a. Full Name, Mailir	ng Address & Phone		b. Coordinated Committee Na	ime	d. Comments		
(include city, state,		_					
Charlotte Media					<u> </u>		
10100 Park Ced			c. Level Registered (Specify)				
Charlotte, NC 2			Federal	County:			
· ·	.02.10		State 🕅	Municipality:	e, Election Sum to Date		
704 849 2261							
				\$ 670.00			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	D.1.9.01		09/28/2015	\$ 402.00	Ad		
Α	Debit Card	A	09/20/2013	9 402.00			
	Debit Card	A	10/06/2015	\$ 134.00	Ad		
Α	Depit Card	A		<u> </u>			
4. Payee Inform	ation		Add	Remove			
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee N	ame	d. Comments		
(include city, state,	& zip)	•					
Charlotte Media		<u></u>		,			
10100 Park Ced			c, Level Registered (Specify)				
Charlotte, NC			Federal	County:	1		
704 849 2261	20210		State 🕅	Municipality:	e. Election Sum to Date		
/04 849 2201					6 (70.00		
	-				\$ 670.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
			10/13/2015	\$ 134.00	Ad		
A	Debit Card	Α	10/13/2013	\$ 134.00			
A	Debit Card	Α	10/19/2015	\$ 134.00	Ad		
Α	<u> </u>	A	10/19/2010	」	6 071.07		
5. Total only th					\$ 971.07		
6. Total of ALI	, CRO-1310 Pages				· ·		
(This line goes in	line 13a of Detailed Su	mmary Page CRO-11	00 if Operating Expenses)		\$ 1,263.50		
(This line goes in	i line 13b of Detailed Su	mmary Page CRO-11	00 if Contrib to Candidates/Politi	ical Comm)			
			00 if Coordinated Party Expendit	tures)			
	les (List detailed ex			FD			
A* - Media	B* - Printing	C* - Fu	adraising		her Candidate		
E - Salaries	E - Salaries F* - Equipment G - Political Party OCT 28 2015 H* - Holding Public Office Expenses						
E - Salaries F* - Equipment G - Political Party OCT 2 8 2015 H* - Holding Public Office Expenses I - Postage J - Penaltics K* - Office Expenses CT 2 8 2015 Q* - Donation to Legal Expense Fund							
O* - Other							
* Codes requi	re detailed explana	tion in required :	remarks/1901dCoxBoard of E	lections			

Disbursem	ante	• ,			Amendment		
		from the commit	Pg tee for; operating expens		2 ☐ Yes ⊠ No		
committees and	coordinated party ex	xpenditures.	tee for, operating expens	cs, contributions te	Candidate/pontical		
7,000,000	Full Name (and Fur	ويستبي والمستوني والمستوني والمستوني والمستوني	·	tekan kerengga persamanan samanan samanan samanan samanan saman saman saman saman saman saman saman saman sama	2. ID Number		
	Elect Roger Fish May				RF122214		
3. Type of Dish	oursement <u>(Plea</u>	ase use separate (CRO-1310 forms for eac	h type of Disburse	ment.)		
Operating I			andidates/Political Committees		Coordinated Party Expenditures		
4. Payee Inform			Add [Remove			
3	ling Address & Phone		b. Coordinated Committee	e Name	d. Comments		
(include city, state,	, & zip)		_				
Roger Fish	·		1 17 100				
11001 Magna I Indian Trail, N			c. Level Registered (Special		_		
704 635 5390	C 20079		State	County:	That is a		
704 033 3370				Municipality:	e. Election Sum to Date		
					\$ 465.08		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Check	K	10/19/2015	\$ 23.21	Office Supplies		
A	Check	0	10/19/2015	\$ 47.91	Event Candy		
4. Payee Inforn	nation	П	Add	Remove			
	ing Address & Phone	 -	b. Coordinated Committee		d. Comments		
(include city, state,	& zip)						
Roger Fish							
11001 Magna L			c. Level Registered (Specif	ý)			
Indian Trail, NO	C 28079		Federal _	County:			
704 635 5390			State	Municipality:	e. Election Sum to Date		
					\$ 465.08		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
Ä	Check	I	10/19/2015	\$ 18.82	Postage		
				1 10.02	Lafting D. CH		
A	Check	K	10/19/2015	\$ 33.75	Inkjet Refill		
4. Payee Inform	····		Add	Remove			
	ing Address & Phone	·	b. Coordinated Committee	Name	d. Comments		
(include city, state,	& zip)		_				
Roger Fish 11001 Magna L	n		I will Down 1/9 of the				
Indian Trail, NO			c. Level Registered (Specif				
704 635 5390	2001)		State	County: Municipality:	e. Election Sum to Date		
, , , , , , , , , , , , , , , , , , , ,				i with coparity.	c. Election Sum to Date		
•					\$ 465.08		
f. Account Code	g. Form of Payment	h, Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
Α	Check	· K	10/19/2015	\$ 168.74	Toner		
				\$			
5. Total only thi	is Page				\$ 292.43		
6. Total of ALL	CRO-1310 Pages				222.73		
			0 if Operating Expenses)		\$ 1262.50		
(This line goes in	line 13b of Detailed Sum	mary Page CRO-110	0 if Contrib to Candidates/Pol	ltical Comm)	\$. 1,263.50		
			oif Coording at Party Expand	ityres)			
A* - Media	es (List detailed exp B*-Printing	c* - Fund		VLU	C-111		
E - Salaries	F* - Equipment	G - Politic		05 H*-Holdin	ner Candidate g Public Office Expenses		
I - Postage	J - Penalties	K* - Offic	e Expenses		on to Legal Expense Fund		

I - Postage O* - Other

Loan Proceeds

Pg 1 of 1 Yes No

Use this form to report proceeds from a loan and loan endorser's information

A loan proceeds statement must accompany each loan that is from an individual

	me (and Fund if applicable)			2. ID Number					
Committee to Elect Ro	oger Fish Mayor				RF122214				
3. Lender Informatio	n 🗍	Add			Remove				
a. Full Name, Mailing Add	ress & Phone	b. Job Title/Profess	slon		d. Comments				
(include city, state, & zij	***	Homemaker							
Nila Modesta Salazar	Fish			•					
11001 Magna Lane			·	*	e. Start Date (mm/dd/yyyy)				
Indian Trail, NC 280	79	c. Employer's Nam	e/Specific Field		02/23/2015				
		None			f. End Date (mm/dd/yyyy)				
					1. End Date (min/di/yyyy)				
		1							
g. Rate	h. Security Pledged	. Account Code	j. Form of Pa	yment	k. Amount				
0 %	None	A	Check		\$ 2,000.00				
		<u>, </u>	Check						
l. Full Name of Lending In	stitution	·		m, I	Loan Number				
N/A	<u>.</u>				N/A				
4. Endorsers/Makers	(The people who guarantee th								
a. Full Name, Mailing Add		b. Job Title/Prof	fession	c, E	mployer's Name/Specific Field				
(include city, state, & zij	n)	_		.					
N/A	·								
	·	d. Percentage		e. A	mount				
		<u> </u>							
			. 9	% \$					
a. Full Name, Mailing Add	ress & Phone	b. Job Title/Prof	fession	c. E	mployer's Name/Specific Field				
(include city, state, & zi									
		,							
			•						
		d. Percentage			mount				
		d. Fercentage			MOURT				
				% \$					
a. Full Name, Mailing Add		b. Job Title/Prof	fession	c. E	mployer's Name/Specific Field				
(include city, state, & zij	9)								
	•								
	•	d. Percentage		e. A	mount				
				% \$					
Toll Many Martin 1 4 2	luna P Diana	L Tal man m			the state of the s				
a. Full Name, Mailing Add (include city, state, & zi	.)	b. Job Title/Prot	iession	c. E	mployer's Name/Specific Field				
(include city, state, & 2)	" RECEIVED	·	-		·				
	OCT 2 8 2015								
	Union Co. Board of Elections	d. Percentage	·.	e. A	mount				
	Singh 45. Board of Electronic		9	% \$					
5. Total of ALL C	RO-1410 Pages			. '	e 2000 00				
	2 9 of Detailed Summary Page CRO-1100)			\$ 2,000.00				

Use this form to report any unpaid debts or obligations ow 1. Committee Full Name (and Fund if applicable)	ed by the committee,	to include o	2. ID Number
Committee to Elect Roger Fish Mayor			
3. Creditor Information	☐ Add ☐ Reme	ove	RF122214
a. Full Name, Mailing Address & Phone (include city, state, & zip)	Note: All payments	made toward	I debts should be listed on form CRC se listed as this creditor.
Katherine Lucille Busby	b. Description of Cr	editor	
11003 Magna Lane Indian Trail, NC 28079	Private Pers	son	
c. Beginning Balance d. Total Amount Paid	e. Total Amount Inc	urred	f. Remaining Balance
\$ 0 \$ 28.53	\$ 28.	53	\$ 28.53
g. Incurred Debts (what the committee received this period)	etti argani ete eretteetti tettiene, eret aiteesti aasta aasta aasta a	patan na na pilanta patangan	
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)	g2. Date (mm/dd/yy	yy) g3. A	mount
Cathy's Coffee	10/17/2015	\$	28.53
606 Indian Trail Road South	g4. Purpose Code	g5. Requir	red Remarks
Indian Trail, NC 28079 (704) 821-7375	0	Food	& Beverage
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)	g2. Date (mm/dd/yy)	y) g3. A	mount
(include thy, state, & Zip)		\$	
•	g4. Purpose Code	g5. Requir	ed Remarks
•	·		
1. Purchase Place Full Name, Mailing Address & Phone	g2. Date (mm/dd/yyy	y) g3, Aı	mount
(include city, state, & zip)		\$	
	g4. Purpose Code		ed Remarks
-			
1. Purchase Place Full Name, Mailing Address & Phone	g2. Date (mm/dd/yyy	y) g3, A1	mount
(include city, state, & zip)	_	\$	-
·	g4. Purpose Code	g5. Require	ed Remarks
1. Purchase Place Full Name, Mailing Address & Phone	g2. Date (mm/dd/yyy	y) g3. An	nount
(include city, state, & zip)		\$	
	g4. Purpose Code	g5. Require	ed Remarks
Total only this Page This should be the sum of all items 'g3.' from this page)			\$ 28.53
. Total of ALL CRO-1610 Pages This line must be on line 22 of Detailed Summary Page CF	RO-1100)	(\$ 103.47
. Pupose Codes (List detailed expenditure cod	le in (g4.)		
* - Media B* - Printing C* -	Fundraising		nother Candidate
- Postage J - Penalties K*.	Political Party Office Express Office Express	H* - Hold	ding Public Office Expenses
Codes require detailed explanation in required remarks fid	eld (g5.) FILU		ש
	oard of Elections		

Debts and Obligations Owed By the Com			of <u>4</u>	_ 🗆	endment Yes	X No
Use this form to report any unpaid debts or obligations owed a committee Full Name (and Fund if applicable)	by the committee, to	includ		paign cre		purchases.
	The state of the s			4. 11.		
Committee to Elect Roger Fish Mayor	Fed -			L	RF1222	214
3. Creditor Information	Add Remove		•			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	Note: All payments ma 1310 wit				be listed of s creditor.	
Gail Marie Furr	b. Description of Credi					
1002 Horton Ridge Ct.	Private Persor	'n				
Indian Trail, NC 28079 (704) 684 1331	111144	,,				
c. Beginning Balance d. Total Amount Paid	e. Total Amount Incur	red		f. Remai	ning Balan	ıce
\$ 0 \$ 0	\$ 27.40	0		\$	27.4	10
g. Incurred Debts (what the committee received this period)						
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)	g2. Date (mm/dd/yyyy)) g3	3. Amou	<u>nt</u>		
Paper & Inc. Printing	10/02/2015	\$!	82.20/3	•	
740 Stallings Rd.	g4. Purpose Code	g5. Re	quired R		-	
Matthews, NC 28104 (704) 821-4500	В .	Pos	stcard	Is		
g1. Purchase Place Full Name, Mailing Address & Phone	g2. Date (mm/dd/yyyy)) g:	3. Amou	nt		
(include city, state, & zip)	-	!	\$			
	g4. Purpose Code	g5. Re	quired R	Remarks		
			3			
g1. Purchase Place Full Name, Mailing Address & Phone	g2. Date (mm/dd/yyyy)) g?	3. Amou	nt		
(include city, state, & zip)		.;	\$			
	g4. Purpose Code	g5. Re	g5. Required Remarks			
· · · · · · · · · · · · · · · · · · ·						
g1. Purchase Place Full Name, Mailing Address & Phone	g2. Date (mm/dd/yyyy)) g ³	g3. Amount			
(include city, state, & zip)		1	\$			
	g4. Purpose Code	25. Re	quired R		 -	
		8		,		•
gl. Purchase Place Full Name, Mailing Address & Phone	g2. Date (mm/dd/yyyy)) g?	3. Amou	nt		
(include city, state, & zip)			\$		•	
•	g4. Purpose Code	g5. Red	quired R	Remarks		
 	-		-			
4. Total only this Page (This should be the sum of all items 'g3.' from this page)			\$	######################################	27.40	
5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO	D-1100)		\$		103.47	
6. Pupose Codes (List detailed expenditure code						
				her Cano		*1
2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	litical Party ffice Carlenges — [Holdin Other	g Public	c Office i	Expenses
* Codes require detailed explanation in required remarks field		V	ブ			

CRO-1610

Debts and Obligation	ons Owed By	the Com	mittee	Pg 4		of 4	Amendme Yes	nt No	
Use this form to report any u	npaid debts or obliga	ations owed				de cam	paign credit c	ard purchases.	
1. Committee Full Name (a	nd Fund if applicat	ole)					2. ID Numb	er	
Committee to Elect Ro	ger Fish Mayor	-					· RF1	22214	
3. Creditor Information			Add	Remove	3				
a. Full Name, Mailing Address &	Phone	· · · · · · · · · · · · · · · · · · ·	Note: All					ied on form CRO	
(include city, state, & zip)			b. Descrin	tion of Credi		payee us	ted as this credi	tor.	
Gail Marie Furr	*						- "		
1002 Horton Ridge Ct. Indian Trail, NC 28079	[70A] COA 1221		Priv	ate Person	1				
c. Beginning Balance	d. Total Amount Paid		e. Total A	mount Incur	red		f. Remaining Balance		
\$ ₀	\$ 0		\$	39.00)			9.00	
g. Incurred Debts (what the comm		ođ)			desprished	<u>e</u> r es alla estadoraria entre estadoraria estadoraria estadoraria estadoraria estadoraria estadoraria estadoraria estadoraria entre entre estadoraria entre			
g1. Purchase Place Full Name, Ma			g2, Date (mm/dd/yyyy)		g3. Amou	int		
(include city, state, & zip) United States Post Office Output Description:	Ce		08/:	27/2015		\$ 1	17.00/3	,	
101 S Charlotte Ave.			g4. Purpo		g5, R	equired I		· · · · · · · · · · · · · · · · · · ·	
Monroe, NC 28112	(704) 225-1097		I		St	amps			
g1. Purchase Place Full Name, Ma	alling Address & Phone		g2. Date (mm/dd/yyyy)		g3. Amou	ınt		
(include city, state, & zip)				\$					
	,		g4. Purpo	se Code	g5. R	equired I	Remarks		
		*							
g1. Purchase Place Full Name, Ma (include city, state, & zip)	illing Address & Phone		g2. Date (mm/dd/yyyy)		g3. Amou	ınt		
(minute city) states or 22p)						\$			
·			g4. Purpo	se Code	g5. R	equired I	Remarks		
							•		
g1. Purchase Place Full Name, Ma	iling Address & Phone	-, - <u>-, -, -, -, -, -, -, -, -, -, -, -, -, -</u>	g2. Date (mm/dd/yyyy)		3. Amou	nt		
(include city, state, & zip)						\$			
			g4. Purpo	se Code	25. R	equired F	Remarks	<u> </u>	
				*****	9	1-11-1		·	
g1. Purchase Place Full Name, Ma (include city, state, & zip)	iling Address & Phone		g2. Date (ı	mm/dd/yyyy)	!	3. Amou	nt		
(1				\$			
			g4. Purpo	se Code	g5. R	equired I	Remarks		
		,						·	
4. Total only this Page						ው			
(This should be the sum of all		s page)				\$	39.0	0	
5. Total of ALL CRO-1 (This line must be on line 22)	l 610 Pages of Detailed Summar	y Page CRO	-1100)			\$	103.4	7	
6. Pupose Codes (List d	letailed expendi	ture code	in (g4.)						
A* - Media B* -	Printing	C* - Ft	ındraisir	_			her Candidate		
I - Postage	Equipment Penaltics	K* - O	itical Par ffice Exp			Holdin Other	g Public Offi	ice Expenses	
* Codes require detaile I dx ol		emarks field	(g5.)	electificacienti e liinkilitaalit, akadise	~	~ +11VL			
CRO-1610		NC State Boar	d of Election	ons				February 201	

OCT 2 8 2015

Debts and Obligation	ons Owed By the	Com	mitte	e pg	3		of		Yes	No
Use this form to report any un 1. Committee Full Name (and 1.)		s owed t	y the c	ommiltee	e, to 11	nclu	de camp	oaign ci	edit card Number	purchases.
								_,,		214
Committee to Elect Ro	ger Fish Mayor	· · · · · · · · · · · · · · · · · · ·	λdd	I I Day	nove			· · · · · · · · · · · · · · · · · · ·	RF122	214
3. Creditor Information a. Full Name, Mailing Address &	Phone	L	Add			le for	ward deb	fs should	l he listed o	n form CRO-
(include city, state, & zip)	i none		11020.7						is creditor.	
Pam DeMaria			b. Descr	iption of C	Credito	r				
1108 Hunters Trail Dr.			Private Person							
Indian Trail, NC 28079	(704) 621 7336									
c. Beginning Balance	d. Total Amount Paid		e. Total	Amount I	ncurre	:d		f. Rema	ining Balan	ice
\$ 0	\$ O	e de la composição de la c	\$ 8.54				\$	8.54	4	
g. Incurred Debts (what the comn			o2 Doto	e (mm/dd/y		1	g3. Amou	mt		
g1. Purchase Place Full Name, Ma (include city, state, & zip)	aming Address & Phone					.			- -	-
Call Printing & Copying	<u> </u>			9/22/20:			\$ 		25.62/3	
311 Indian Trail Rd.			g4. Pur	pose Code	2	ξ5. R	equired l	Remarks	<u> </u>	
Indian Trail, NC 280	79 (704) 821-6556		В			E۱	ent Siرا	gns/Fo	orms	
g1. Purchase Place Full Name, M	ailing Address & Phone		g2. Date	e (mm/dd/y	уууу)		g3. Amou	int		
(include city, state, & zip)			-				\$			
			g4. Pur	pose Code	. [g5. R	equired)	Remarks	}	
g1. Purchase Place Full Name, M	ailing Address & Phone		g2. Date	e (mm/dd/;	уууу)	Ī	g3. Amor	ınt		
(include city, state, & zip)							\$			
			g4. Pur	pose Code	. [g5. R	tequired !	Remarks	3	
g1. Purchase Place Full Name, M	ailing Address & Phone	,	g2, Date	e (mnı/dd/	уууу)		g3. Amou	ount		
(include city, state, & zip)							\$			
	•		g4. Pur	pose Code	:	g5. Required Remarks				
				-	Ī	-				
				<u></u>				······································		
g1. Purchase Place Full Name, M (include city, state, & zip)	ailing Address & Phone		g2. Date	e (mm/dd/	уууу)		g3. Amou	ınt		
(include city, state, & zip)			1				\$,
			g4. Pur	pose Code	·	g5. F	Required	Remark	s	
							·			
4. Total only this Page (This should be the sum of a		ge)					\$		8.54	
5. Total of ALL CRO- (This line must be on line 22	1610 Pages of Detailed Summary Pa	age CRO)-1100)				\$		103.47	_
6. Pupose Codes (List		e code	in (g4	l.)						
A* - Media B*	- Printing	C* - F	undrai	sing			To Ano			T3
	- Equipment - Penalties		litical F Mfice E	'arty 'xpenses			- Holdii - Other		ne Office	Expenses
* Codes require detailed exp				JEIN.	Æ.	D	- VIIICE		al Demonstrative Section 200	rojstica militario de la compania d
CRO-1610	NC	State Bo		ctions			***************************************	,		February 2011

Refunds/Rei	mburs	ements To t	he Committ	ee		Pg <u>1</u>	of <u>1</u>		Yes No		
Use this form to re	port refui	nds received by th	e committee or rei	mburse	ements	for a prev	vious expenditure.				
1. Committee Full			icable)				2. ID Numb				
Committee to Elec	t Roger I	fish Mayor						RF	122214		
3. Contributor In	formatio	n		Add		Remo	ve				
a. Full Name, Mailing	Address &	Phone	*		e of Cor	nmittee		g. C	Comments		
(include city, state,	& zip)				Candio	late [PAC				
Metrolina Native	American	Association	·		Refere	ndum [Party				
8001 N. Tryon Str				e. Level Registered (Specify)					h. Original Expenditure Date		
Charlotte, NC 282	262				Federa	<u></u>	County:		08/18/2015		
704 750 9609				State Municipality:					·		
					-			i. 0	riginal Expenditure Amt		
								\$	150.00		
b. Job Title/Profession	1	c. Employer's Nam	e/Specific Field	f, Purp	ose			j. E	lection Sum to Date		
N/A		Non-profit	•	1	ı Progi	ram		\$	150.00		
		organization	·	Book	ζ				150.00		
k. Account Code	i. Form o	f Payment	m. In-Kind Descrip	ption n. Date (mm/dd/yyyy)					o. Amount		
В	Check			10/05/2015					\$ 150.00		
3. Contributor In				Add		Remo	ve				
a. Full Name, Mailing	Address &	Phone .		d. Typ		nmittee		g. Comments			
(include city, state,	& zip)				Candio	late _	PAC				
				Ш_	Refere		Party				
						tered (Speci		h. (Original Expenditure Date		
•				片	Federa		County:				
				├	State	L	Municipality:	1.0	wining Francisco And		
								1.0	riginal Expenditure Amt		
				•				\$			
b. Job Title/Profession	1	c. Employer's Nam	e/Specific Field	f. Purpose					lection Sum to Date		
							•	\$			
k. Account Code	l. Form o	f Payment	m. In-Kind Descrip	tion		n. Date (n	ım/dd/yyyy)		o. Amount		
,									\$		
3. Contributor Int	formatio	n	<u>'</u>	Add		Remo	ve				
a. Full Name, Mailing					e of Cor		4 ha 5a	g. C	Comments		
(include city, state, d	& zip)				Candid Refere	<u></u>	PAC Party				
				e. Leve		ered (Speci		h (Original Expenditure Date		
					Federa		County:		ongman Dapenditure Date		
			·		State		Municipality:				
		•						i. 0	riginal Expenditure Amt		
•			-					\$			
b. Job Title/Profession	,	c. Employer's Name	e/Specific Field	f. Purp	ose			j, E	lection Sum to Date		
•								\$			
k. Account Code	l, Form o	f Payment	m. In-Kind Descrip	tion		n. Date (n	ım/dd/yyyy)		o. Amount		
									\$		
4 Motel	Dam-										
4. Total only this Page 5. Total of ALL CRO-1240 Pages RECEIVED						\$ 150.00					
(This line must be on	line 10 of	Pages Detailed Sunvnary Pa	nge CRO-1100)	· -				\$	150.00		
CRO-1240			UCT 2 8 2015	NC State	Board o	f Elections			December 2007		

Union Co. Board of Elections

Amendment